PTO/SB/22 (08-03)

36032/096

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

		In re Application of F	Richard A. We	ekley		
		Application Number	10/047,311	Filed 1/15/20	02	
		For Feature Classit	ication for Tin	ne Series Data		
		Art Unit 2863	Examiner M	leagan S. Walling		
identified applica						
The requested e	xtension and appropriat	e non-small-entity fee	are as follows	(check time period	desired):	
$\boxtimes$	One month (37 CFR 1.17(a)(1))			\$ <u>110</u>		
	Two months (37 CFR 1.17(a)(2))			\$		
	Three months (37 CF)	R 1.17(a)(3))		\$	<u> </u>	
	Four months (37 CFR	t 1.17(a)(4))		\$	<u> </u>	
	Five months (37 CFR	1.17(a)(5))		\$	·	
<ul> <li>Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55.00.</li> <li>A check in the amount of the fee is enclosed.</li> </ul>						
⊠ Paym	syment by credit card. Form PTO-2038 is attached.					
☐ The □	Director has already been authorized to charge fees in this application to a De the Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 502622.  I have enclosed a duplicate copy of this sheet.  I am the plicant/inventor.    assignee of record of the entire interest. See 37 CFR 3.71    Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   Attorney or agent of record. Registration Number 37.936						
i am the		d of the entire interest.	See 37 CFR	3 71	5E-2	
	_ •	er 37 CFR 3.73(b) is er			2003 1-1 ER	: 1
		of record. Registration			28	
attorney or agent under 37 CFR 1.34(a).					8	
		er if acting under 37 CFR 1 3				
included or	Information on this for this form. Provide cr					
/(-/0-63 Date				Signature	e	
(3)	03) 938-9999 ext. 13			Michael J. Setter, F	Reg. 37,936	
Telephone Number				Typed or printed name		

NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if

more than one signature is required see below ☐ Total of 1 forms are submitted

Discrete the Suprimer of Supr If you need assistance in completing the form call 1-800-PTO-9199 and select option 2